



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

MPA- 174720

PRELIMINARY RECITALS

On May 26, 2016, petitioner filed a hearing request under Wis. Stat., §49.45(5), to review a decision by the Division of Health Care Access and Accountability (DHCAA) to deny Medical Assistance (MA) authorization for breast implant replacement surgery. The hearing was held on June 29, 2016, at Madison, Wisconsin, with the parties appearing by telephone.

No issue remains for determination.

PARTIES IN INTEREST:

Petitioner:

[REDACTED]
[REDACTED]
[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

By: Written submission of [REDACTED], MD

ADMINISTRATIVE LAW JUDGE:

Brian C. Schneider
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a 54-year-old resident of Milwaukee County who is certified for MA.
2. On April 15, 2016, the Aurora West Allis Medical Center requested prior authorization for MA coverage of breast implant replacement surgery, PA no. [REDACTED]
3. The Division denied the request on May 11, 2016 with a finding that the service was cosmetic and not medically necessary.

DISCUSSION

Following the hearing in this case petitioner's doctor submitted additional information about the requested surgery to the DHCAA. By a letter dated July 6, 2016, Dr. [REDACTED] wrote that the Department reversed its position and it would approve the surgery. Petitioner's doctor simply needs to file a new prior authorization request along with a copy of Dr. [REDACTED]'s July 6 letter for approval. Petitioner's doctor received a copy of the letter but petitioner should follow up with her office to make sure the new authorization is filed. I will dismiss the appeal because the matter is resolved.

CONCLUSIONS OF LAW

No issue remains for determination; the Department has approved the requested surgery.

THEREFORE, it is

ORDERED

That the petition for review is dismissed.

REQUEST FOR A REHEARING

You may request a rehearing if you think this decision is based on a serious mistake in the facts or the law or if you have found new evidence that would change the decision. Your request must be **received within 20 days after the date of this decision**. Late requests cannot be granted.

Send your request for rehearing in writing to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400 **and** to those identified in this decision as "PARTIES IN INTEREST." Your rehearing request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and explain why you did not have it at your first hearing. If your request does not explain these things, it will be denied.

The process for requesting a rehearing may be found at Wis. Stat. § 227.49. A copy of the statutes may be found online or at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be filed with the Court **and** served either personally or by certified mail on the Secretary of the Department of Health Services, 1 West Wilson Street, Room 651, **and** on those identified in this decision as "PARTIES IN INTEREST" **no more than 30 days after the date of this decision** or 30 days after a denial of a timely rehearing (if you request one).

The process for Circuit Court Appeals may be found at Wis. Stat. §§ 227.52 and 227.53. A copy of the statutes may be found online or at your local library or courthouse.

Given under my hand at the City of Madison,
Wisconsin, this 8th day of July, 2016

\s _____
Brian C. Schneider
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on July 8, 2016.

Division of Health Care Access and Accountability